Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 1 of 75

| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | _Isabel First name | First name |
| Write the name that is on your government-issued picture identification (for example, your driver's license or passport | Middle name | Middle name Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| All other names you have used in the last 8 years | First name | First name |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- 6572 | xxx - xx- |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 2 of 75

| D | ebtor 1 Isabel First Name | Duenas Middle Name Last Name | Case number (if known) |
|----|--|--|--|
| | First Name | Middle Name Last Name | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 1641 West 38th Place Number Street | Number Street |
| | | Chicago Illinois 60609 | |
| | | City State Zip Code | City State Zip Code |
| | | Cook County | County |
| | | • | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to |
| | | notices to you at this mailing address. | this mailing address. |
| | | Number Street | Number Street |
| | | | |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 3 of 75

| Debtor 1 Isabel | | Duenas | | Case number (if kno | wn) |
|---|---|---|--|---|---|
| First Name | Middle Name | Last Name | | | |
| Part 2: Tell the Court Abo | out Your Bankrupte | cy Case | | | |
| The chapter of the Bankruptcy Code you are choosing to file under | | orief description of each, se 32010)). Also, go to the top | | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. How you will pay the fee | more details at cashier's check may pay with a line of to pay individuals to line of the official polyou choose the | cout how you may pay. To k, or money order. If your a credit card or check with the fee in installments. In Pay Your Filing Fee in Inst my fee be waived (You this not required to, waive verty line that applies to y | ypically, if you attorney is so a pre-printer of you choose stallments (Commay request a your fee, anyour family signs the Application of the property of the Application of the Applica | ou are paying the submitting your ed address. e this option, sig official Form 103 this option only d may do so onl ze and you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official |
| 9. Have you filed for bankruptcy within the last 8 years? | ✓ No. Yes. District District District | | When When When | MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. | andlord obtained an eviction | | | of You (Form 101A) and file it with |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 4 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have Ⅵ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 5 of 75

Debtor 1 Isabel Duenas Case number (if known)

First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. The law requires that Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 6 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded ✓ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do vou estimate that you owe? 100-199 10,001-25,000 More than 100,000 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$10,000,000,001-\$50 billion to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Isabel Duenas Signature of Debtor 1 Signature of Debtor 2 Executed on ___10/23/2018 Executed on MM / DD / YYYY MM / DD / YYYY

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 7 of 75

| Debtor 1 Isabel | | Duenas | Case number (ii | fknown) | |
|--|----------------------------|-----------------------|-----------------------------|--|---|
| First Name | Middle Name | Last Name | | | |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 12 | 2, or 13 of title 11, Unite | nave informed the debtor(s) about ad States Code, and have explained the also certify that I have delivered to the | |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § | 342(b) and, in a case in | which § 707(b)(4)(D) applies, certify that | I |
| represented by an | | | | dules filed with the petition is incorrect. | |
| attorney, you do not | _ | | | | |
| need to file this page. | /s/ Jacob Comrov | | Date | 10/23/2018 | |
| . • | Signature of Attorney for | or Debtor | | MM / DD / YYYY | |
| | olgitatato of Automoy is | 5. 505(6) | | | |
| | | | | | |
| | Jacob Comrov | | | | |
| | Printed name | | | | |
| | | | | | |
| | Semrad Law Firm | | | | |
| | Firm name | | | | |
| | 20 S. Clark Street | | | | |
| | Street | | | | |
| | 28th Floor | | | | |
| | | | | | |
| | Chicago | | Illinois | 60603 | |
| | City | | State | Zip Code | |
| | | | | | |
| | Contact phone | 3123866421 | Email address | jcomrov@semradlaw.com | |
| | | | | | |
| | | | | | |
| | Bar number | | State | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 8 of 75

| Fill in this infor | mation to identify your ca | ase: | | |
|---------------------------|----------------------------|-------------|----------------------|--|
| Debtor 1 | Isabel | | Duenas | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| Case number (If known) | | | (State) | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|------------------------------------|
| 1. Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | Ψ0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$3,993.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$3,993.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | Ф0.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$10,182.00 |
| Your total liabilities | \$10,182.00 |
| Part 3: Summarize Your Income and Expenses | |
| | |
| Schedule I: Your Income (Official Form 1061) | \$1,900.00 |
| Copy your combined monthly income from line 12 of Schedule I | |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,900.00 |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 9 of 75

| Deb | tor 1 Isabel | | Duenas | Case number (if ki | nown) | |
|-------------|---|-------------------------------|--|--------------------------|---------------------|------------|
| | First Name | Middle Name | Last Name | | _ | |
| Part | 4: Answer These Que | stions for Administrat | tive and Statistical Record | s | | |
| 6. A | re you filing for bankruptcy | under Chapters 7, 11, o | r 13? | | | |
| | No. You have nothing to | report on this part of the fo | orm. Check this box and submit | this form to the court w | ith your other sche | edules. |
| [| ✓ Yes. | | | | | |
| 7. W | /hat kind of debt do you ha | ve? | | | | |
| [| | | umer debts are those incurred by Fill out lines 8-10 for statistical pu | | | |
| | Your debts are not prime this form to the court with | | ou have nothing to report on this | part of the form. Check | κ this box and sub | mit |
| | From the Statement of You Form 122A-1 Line 11; OR , F | _ | ne: Copy your total current monthorm 122C-1 Line 14. | nly income from Official | | \$1,900.00 |
| 9. | Copy the following specia | I categories of claims fro | om Part 4, line 6 of Schedule E | /F: | | |
| | From Part 4 on Schedule | E/F, copy the following: | | Total o | claim | |
| | 9a. Domestic support obliga | ations (Copy line 6a.) | | \$0.00 | | |
| | 9b. Taxes and certain other | debts you owe the govern | ment. (Copy line 6b.) | \$0.00 | | |
| | 9c. Claims for death or pers | onal injury while you were i | intoxicated. (Copy line 6c.) | \$0.00 | | |
| | 9d. Student loans. (Copy lin | e 6f.) | | \$0.00 | | |
| | | | or divorce that you did not report | as \$0.00 | | |
| | priority claims. (Copy line 6g | J.) | | \$0.00 | | |
| | 9f. Debts to pension or prof | it-sharing plans, and other | similar debts. (Copy line 6h.) | \$0.00 | | |
| | 9g. Total. Add lines 9a thro | ugh 9f. | | \$0.00 | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 10 of 75

| Fill in this | information to identify your c | ase: | | | | | |
|--|--|---|--|---|----------------------------|---|--|
| Debtor 1 | Isabel | | | Duenas | | | |
| Debtor 2 | First Name | Middle Na | ame | Last Name | | | |
| (Spouse, if fil | First Name | Middle Na | ame | Last Name | | | |
| United Sta | tes Bankruptcy Court for the: | Northern | 1 | District of Illinois | | | |
| Case num (If known) | ber | | | (State) | | | |
| Officia | I Form 106A/B | | | | <u>_</u> | | Check if this is an amended filing |
| Sched | dule A/B: Prope | rty | | | | | 12/1 |
| category v responsibl write your | where you think it fits best. I e for supplying correct infor name and case number (if k | Be as complete ar mation. If more sp nown). Answer ev | nd accurat bace is nee very questi | only once. If an asset fits in e as possible. If two married ded, attach a separate shee on. er Real Estate You Own o | people are t to this fo | e filing together, both a rm. On the top of any a | re equally |
| 1. Do you | • • | quitable interest i | n any resid | lence, building, land, or simil | ar propert | y? | |
| | No. Go to Part 2 | | | | | | |
| 1.1 | Yes. Where is the property? Street address, if available, or | other description | Single | ne property? Check all that app -family home x or multi-unit building | oly. | the amount of any secu | claims or exemptions. Put ired claims on <i>Schedule D:</i> irms <i>Secured by Property.</i> |
| | | | Condo | ominium or cooperative factured or mobile home | | Current value of the entire property? | Current value of the portion you own? |
| | Number Street City State | Zip Code | Land Invest Times Other | | | Describe the nature of interest (such as fee sthe entireties, or a life | simple, tenancy by |
| | | | one. Debto | an interest in the property? (r 1 only r 2 only | Check | Check if this is co (see instructions) | mmunity property |
| | | | At leas | r 1 and Debtor 2 only st one of the debtors and anoth prmation you wish to add abo dentification number: | | m, such as local | |
| If you | own or have more than one, li Street address, if available, or | | Single | ne property? Check all that app | oly. | the amount of any secu | claims or exemptions. Put ared claims on <i>Schedule D</i> : aims Secured by Property. |
| | | | Condo | x or multi-unit building ominium or cooperative factured or mobile home | | Current value of the entire property? | Current value of the portion you own? |
| | Number Street City State | Zip Code | Land Invest Times Other | | | Describe the nature o interest (such as fee s the entireties, or a life | simple, tenancy by |
| | | | one. Debto Debto Debto At leas Other infe | an interest in the property? Or 1 only r 2 only r 1 and Debtor 2 only st one of the debtors and anoth premation you wish to add abordentification number: | er | (see instructions) | ommunity property |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 11 of 75

| Debtor 1 | | | Duenas | Case numbe | er (if known) | |
|-------------------------------|---|---|---|-----------------|---|---|
| | First Name | Middle Name | Last Name | | | |
| 1.3 Stre | et address, if available, or oth | | /hat is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | apply. | the amount of any secu | claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Nun | nber Street State | Zip Code | Land Investment property Timeshare Other | _ | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | [[[] | /ho has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and their information you wish to add a roperty identification number: | other | (see instructions) | mmunity property |
| | the dollar value of the por ve attached for Part 1. Wri | • | II of your entries from Part 1, incluere. | ding any entrie | s for pages | |
| Do you ow you own t | hat someone else drives. If young, trucks, tractors, sport util | equitable interest ou lease a vehicle, a | in any vehicles, whether they are also report it on Schedule G: Executor cycles | - | - | |
| 3.1 | Make Model: Year: | Acura MDX 2003 | Who has an interest in the propone. Debtor 1 only | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: 2003 Acura MDX | 152000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community | | Current value of the entire property? \$2775.00 | Current value of the portion you own? \$2775.00 |
| 3.2 | Make Model: Year: | | Who has an interest in the propone. | | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community instructions) | | Current value of the entire property? | Current value of the portion you own? |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 12 of 75

| | Isabel First Name | Middle Name | Duenas Last Name | Case number | er (if known) | |
|-----|---|-------------|--|--|--|---|
| 3.3 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor instructions) | nly rs and another | the amount of any secu | claims or exemptions. Pur ured claims on <i>Schedule Laims Secured by Property</i> . Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or | | the amount of any secu | claims or exemptions. Put irred claims on Schedule Daims Secured by Property. Current value of the portion you own? |
| | | | At least one of the debtor | | | |
| | | • | instructions) er recreational vehicles, other fishing vessels, snowmobiles, | · | | |
| Exa | mples: Boats, trailers, motors | • | er recreational vehicles, other | motorcycle accessori property? Check nly rs and another | Do not deduct secured the amount of any secu | claims or exemptions. Pu tred claims on <i>Schedule L</i> aims Secured by Property. Current value of the portion you own? |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 13 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used furniture, Bed \$500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used electronics, TV (3), Cellphone \$450.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used clothing \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Costume Jewelry \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Nο Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **✓** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1200.00 for Part 3. Write that number here

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 14 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name **Describe Your Financial Assets** Part 4: Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: Chase Bank \$18.00 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ◪ No Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 15 of 75

| Deb | first Name | Middle Name | Duenas Last Nama | Case number (if known) | |
|-----|--------------------------|---|-----------------------------|--|----------|
| | | | Last Name | | |
| 20. | | orate bonds and other negotial include personal checks, cashiers' | | | |
| | | ents are those you cannot transfer | | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information about them | Issuer name: | | | |
| | | | | | <u> </u> |
| | | | | | |
| | | | | | |
| 21. | Retirement or pension | n accounts | | | |
| | | | , thrift savings accounts, | or other pension or profit-sharing plans | |
| | ✓ No | Type of account: | Institution name: | | |
| | Yes. List each account | | mstitution name. | | |
| | separately. | 401(k) or similar plan: | | | _ |
| | | Pension plan: | | | - |
| | | IRA: | | | - |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | Security deposits and | prepayments | | | - |
| | | d deposits you have made so that with landlords, prepaid rent, public | | | |
| | companies, or others | with landiolds, prepaid tent, public | dunities (electric, gas, wa | iter), telecommunications | |
| | ✓ No | | Institution name: | | |
| | Yes | Electric: | | | _ |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | _ |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or for | a number of years) | |
| | ✓ No | | | | |
| | Yes | Issuer name and description: | | | |
| | | | | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 16 of 75

| Debt | or 1 Isabel | | Duenas | Case number (if known) | |
|------|---|---|---|--|---|
| 0.4 | First Name | Middle Na | | day a supplified state tuition program | |
| 24. | |), 529A(b), and 529(b) | ount in a qualified ABLE program, or und ()(1). | ier a qualified state tuition program. | |
| | No | | | | |
| | Instituti | on name and descripti | ion. Separately file the records of any intere | sts.11 U.S.C. § 521(c): | |
| | | | | | |
| | <u> </u> | | | | |
| | | | | | |
| 25. | Trusts, equitable or t | future interests in pr | operty (other than anything listed in line | e 1), and rights or powers | |
| | exercisable for your | benefit | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 26. | | | ecrets, and other intellectual property , proceeds from royalties and licensing agre | oom onts | |
| | - N. | main marries, websites, | , proceeds from royalites and hoorising agree | soments | |
| | No Yes. Describe | | | | |
| | | | | | |
| 0.7 | | | usta u aible a | | |
| 27. | Licenses, franchises Examples: Building pe | | ntangibles es, cooperative association holdings, liquor | licenses, professional licenses | |
| | No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| | | | | | |
| Mor | nev or property owe | nd to you? | | | Current value of the |
| Mor | ney or property owe | ed to you? | | | Current value of the portion you own? |
| Mor | ney or property owe | ed to you? | | | portion you own? Do not deduct secured |
| | | | | | portion you own? |
| | Tax refunds owed to y | | | | portion you own? Do not deduct secured |
| | | you | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed to y ✓ No — Yes. Give specific i about them, | you nformation including whether | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| | Tax refunds owed to y No Yes. Give specific i about them, you already fi | you nformation | | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds owed to y No Yes. Give specific i about them, you already fi and the tax y | you nformation including whether iled the returns | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds owed to y No Yes. Give specific i about them, you already fi and the tax y Family support | nformation including whether iled the returns ears | pousal support, child support, maintenance | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to y No Yes. Give specific i about them, you already fi and the tax y Family support | nformation including whether iled the returns ears | ousal support, child support, maintenance | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to y No Yes. Give specific i about them, you already fi and the tax y Family support Examples: Past due or | nformation including whether illed the returns ears | ousal support, child support, maintenance | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to y No Yes. Give specific i about them, you already fi and the tax y Family support Examples: Past due or | nformation including whether illed the returns ears | ousal support, child support, maintenance | State: Local: e, divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to y No Yes. Give specific i about them, you already fi and the tax y Family support Examples: Past due or | nformation including whether illed the returns ears | ousal support, child support, maintenance | State: Local: e, divorce settlement, property settlemen Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t |
| 28. | Tax refunds owed to y No Yes. Give specific i about them, you already fi and the tax y Family support Examples: Past due or | nformation including whether illed the returns ears | ousal support, child support, maintenance | State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 |
| 28. | Tax refunds owed to y No Yes. Give specific i about them, you already fi and the tax y Family support Examples: Past due or | nformation including whether illed the returns ears | ousal support, child support, maintenance | State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to y No Yes. Give specific i about them, you already fi and the tax y Family support Examples: Past due or | nformation including whether iled the returns ears | ousal support, child support, maintenance | State: Local: e, divorce settlement, property settlemen Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to y No Yes. Give specific i about them, you already fi and the tax y Family support Examples: Past due or No Yes. Give specific i Other amounts some Examples: Unpaid wag | nformation including whether illed the returns ears | e payments, disability benefits, sick pay, vac | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to y ✓ No Yes. Give specific i about them, you already fi and the tax y Family support Examples: Past due or ✓ No Yes. Give specific i Other amounts some Examples: Unpaid wag Social Secur | nformation including whether illed the returns ears | | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to y ✓ No Yes. Give specific i about them, you already fi and the tax y Family support Examples: Past due or ✓ No Yes. Give specific i Other amounts some Examples: Unpaid wag Social Secur | nformation including whether illed the returns ears | e payments, disability benefits, sick pay, vac | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds owed to y ✓ No Yes. Give specific i about them, you already fi and the tax y Family support Examples: Past due or ✓ No Yes. Give specific i Other amounts some Examples: Unpaid wag Social Secur | nformation including whether illed the returns ears | e payments, disability benefits, sick pay, vac | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 17 of 75

| Debt | tor 1 Isabel | | Duenas | Case number (if known) | |
|------|--|----------------------------|--|--|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance paramples: Health, disabil | | alth savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | Yes. Name the insura of each policy and lis | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property If you are the beneficiary property because someo | of a living trust, expect | someone who has died proceeds from a life insurance policy | v, or are currently entitled to receive | |
| | ✓ No Yes. Describe | | | | |
| 33. | | | you have filed a lawsuit or made arance claims, or rights to sue | a demand for payment | |
| 34. | | unliquidated claims of | every nature, including counterc | claims of the debtor and rights | |
| | to set off claims No Yes. Describe | | | | |
| 35. | Any financial assets yo | u did not already list | | | |
| | Yes. Describe | | | | |
| 36. | | • | n Part 4, including any entries fo | . • | \$18.00 |
| Part | 5: Describe Any Bu | siness-Related Pro | perty You Own or Have an Ir | nterest In. List any real estate in Part | 1. |
| 37. | Do you own or have any | y legal or equitable in | terest in any business-related pro | operty? | |
| | | - · | • | | urrent value of the |
| | No. Go to Part 6. Yes. Go to line 38. | | | po Do | ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or | commissions you alro | eady earned | | |
| | Yes. Describe | | | | |
| 39. | Office equipment, furni Examples: Business-relat | | , modems, printers, copiers, fax ma | chines, rugs, telephones, desks, chairs, electro | onic devices |
| | ✓ No Yes. Describe | | | | |
| | | | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 18 of 75

| Deb | tor 1 Isabel | Duenas Case number (if kn | own) |
|--------|--------------------------------|--|------------------------------|
| ı | First Name | Middle Name Last Name | |
| 40. | Machinery, fixtures, e | equipment, supplies you use in business, and tools of your trade | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| | | | |
| 41. | Inventory | | |
| | ✓ No | | |
| | Yes. Describe | | |
| | Ш | | |
| | | | |
| 42. | Interests in partnersh | nips or joint ventures | |
| | ✓ No | | |
| | Yes. Give specific | Name of entity: % of o | wnership: |
| | information about | | |
| | them | | |
| | | | |
| | | | |
| 43. | Customer lists, mailing | g lists, or other compilations | |
| | — | • | |
| | ✓ No | | |
| | Yes. Do your lists i | include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | ☐ No | | |
| | Yes. Desc | oribe | |
| | Ш | | |
| 44. | Any business-related | property you did not already list | |
| | ✓ No | | |
| | lacktriangle | | |
| | Yes. Give specific information | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | all of your entries from Part 5, including any entries for pages you have attached | |
| for Pa | art 5. Write that number | er here | |
| | Describe Δny F | arm- and Commercial Fishing-Related Property You Own or Have an | nterest In |
| Part | If you own or have ar | n interest in farmland, list it in Part 1. | THE COST III |
| 46 | | | |
| 46. | Do you own or have a | any legal or equitable interest in any farm- or commercial fishing-related propert | Current value of the |
| | ✓ No. Go to Part 7. | | portion you own? |
| | Yes. Go to line 47. | | Do not deduct secured claims |
| | | | or exemptions |
| 47. | Farm animals | and the form wind the | |
| | Examples: Livestock, p | oouitry, tarm-raised tisn | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 19 of 75

| Debt | or 1 Isabel First Name | | uenas ast Name | Case number (if known) | |
|--------------|--------------------------------|--|-----------------------|--------------------------------|-------------|
| 48. | Crops-either growing of | | ist ivallie | | |
| | No No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| 49. | Farm and fishing equip | ment, implements, machinery, fixture | s, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| 50. | Farm and fishing suppl | ies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 51. | Any farm- and commer | cial fishing-related property you did n | ot already list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | l of your entries from Part 6, including | | | |
| for Pa ▶ | irt 6. Write that number | here | | | |
| | | | | | |
| | | | | | |
| Part 7 | | perty You Own or Have an Interest perty of any kind you did not already lis | | ot List Adove | |
| 55. | | s, country club membership | st: | | |
| | ✓ No | | | | |
| | Yes. Give specific information | | | | |
| | imonnation | | | | |
| | | | | | |
| 54. Ad | dd the dollar value of al | l of your entries from Part 7. Write tha | t number here | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |
| - · | l ist the Tatala of | Fools Doub of this Forms | | | |
| Part 8 | List the Totals of | Each Part of this Form | | | |
| 55. F | Part 1: Total real estate | , line 2 | | > | |
| 56. p | part 2 total vehicles, line | e 5 | Ф0775 OO | | |
| _ | | d household items, line 15 | \$2775.00 | | |
| | art 4: Total financial as | | \$1200.00 | | |
| | Part 5: Total business-re | | \$18.00 | | |
| | | ishing-related property, line 52 | | | |
| | Part 7: Total other prope | | | | |
| | | Add lines 56 through 61 | | | |
| ₩. I | olai polociiai property. | . aa mioo oo anougii o i | \$3993.00 | Copy personal property total ▶ | + \$3993.00 |
| | | | | | \$3993.00 |
| 63. T | otal of all property on S | chedule A/B. Add line 55 + line 62 | | | Ψ0330.00 |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 20 of 75

| Debtor 1 Isabel | Fill i | n this inforr | nation to identify your ca | ise: | | Ī | |
|--|----------------------------------|--|--|---|--|---|--|
| Database Sankruptory Court for the: Middle Name | | | | | Duenas | | |
| Check if this is considered the construction of the property You Claim as Exempt | Deb | tor 2 | First Name | Middle Name | Last Name | | |
| Case number Check if this is amended filing Check If this is amended Check If this is amended filing Check If this is amended Check I | | | First Name | Middle Name | Last Name | | |
| Official Form 106C Schedule C: The Property You Claim as Exempt 24 Se as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of a additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up in the amount of any applicable statutory limit. Some exemption—such as those for health aids, rights to receive certain benefits, an ax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value of the property is determined to exceed that amount or a law that limits the exemption to a particular dollar amount. However, if you claim an exemption of 100% of fair market value of the property or uncertain benefits, and ax-exempt retirement funds—may be unlimited in the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming federal exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 528(b)(2) Brief description of the property and line on Schedule A/B that lists this be portion you own property of the pr | Unit | ed States B | ankruptcy Court for the: | Northern D | | | |
| Official Form 106C Schedule C: The Property You Claim as Exempt □ deas complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct normation. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of a additional pages, write your name and case number (if known). To reach item of property you claim as exempt, Alternatively, you may claim the full fair market value of the property being exempted up the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and ax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount our exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. □ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) □ You are claiming federal exemptions. 11 U.S.C. § 522(b)(3) Check only one box for each exemption. To be a statutory limit. Part 1: In the first description: Secure 1: In the first description: Secure 2: In the first description: | | | | | (Glate) | | |
| Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you clair as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of a additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up it the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value of the amount of any applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that lists this property Check only one box for each exemption. Check only one box for each exemption. Checking account, Chase Bank Line from Schedule A/B: 17 Brief description: Secondary of the property and property and line on Schedule A/B: 17 Brief description: Secondary of the property and line on Schedule A/B: 17 Brief description: Secondary of the property of the property and line on Schedule A/B: 17 Brief description: Secondary of the property of the proper | Of | ficial I | orm 106C | | | _ | Check if this is ar amended filing |
| Information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of a additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and sax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that lists this property on the property of the property and property on the property and property on the property and property and property exemption. Check only one box for each exemption. Check only one box for each exemption. Check only one box for each exemption. The form Schedule A/B: Brief description: Check only of fair market value, up to any applicable statutory limit statutes, up to any applicable statutory limit the property limit statutes (limit). | Sc | hedule | C: The Prop | erty You Claim a | s Exempt | | 04/16 |
| Ine on Schedule A/B that lists this property Check only one box for each exemption. Copy the value from Schedule A/B Brief description: Checking account, Chase Bank Line from Schedule A/B: 17 Brief description: Used clothing Line from Used clothing Line from Line from Used clothing Line from Line from Line from Line from Line from Used clothing Line from Line fro | For state the stax- under/our | each item e a specif amount o exempt re er a law ti r exemptic t1: Ident Which set | of property you claid ic dollar amount as of any applicable state etirement funds—manat limits the exemption would be limited the ify the Property You of exemptions are you are claiming state and ferre claiming federal exemptions. | m as exempt, you must sexempt. Alternatively, you utory limit. Some exempt by be unlimited in dollar action to a particular dollar to the applicable statutor. Claim as Exempt Claiming? Check one only, evideral nonbankruptcy exempt propriors. 11 U.S.C. § 522(b)(2) | specify the amount of the our may claim the full fair mations—such as those for himount. However, if you clamount and the value of the yamount. If your spouse is filing with you out the proof of the second secon | arket value of the ealth aids, rights laim an exemption the property is d | ne property being exempted up to so to receive certain benefits, and on of 100% of fair market value |
| description: Checking account, Chase Bank Line from Schedule A/B:17 Brief description: Used clothing Line from Line from Line from Line from Line from Line from Schedule A/B: | | line on Sc | | the portion you own Copy the value from | | | Specific laws that allow exemption |
| description: Used clothing Line from \$200.00 100% of fair market value, up to any applicable statutory limit | | Check Chase Line from | ing account, Bank | \$18.00 | \$18.00 100% of fair market value | ue, up to any | 735 ILCS 5/12-1001(b) |
| annlicable statutory limit | | description Used | | \$200.00 | 100% of fair market value | ue, up to any | 735 ILCS 5/12-1001(a) |
| | | | VB: 11 | | applicable statutory limit | <u> </u> | |

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 21 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$450.00 description: \checkmark \$450.00 Used electronics, TV (3), Cellphone 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 07 735 ILCS 5/12-1001(b) Brief \$500.00 description: $\overline{}$ \$500.00 Used furniture, Bed 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(c); 735 ILCS \$2,775.00 5/12-1001(b) description: $\overline{}$ \$2,400.00; \$375.00 Acura MDX, 2003, 2003 100% of fair market value, up to any Acura MDX applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$50.00 description: \$50.00 **Costume Jewelry**

100% of fair market value, up to any

applicable statutory limit

I ine from

Schedule A/B:

12

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 22 of 75

| | | | <u> </u> | _ | | |
|--------------|-------------------------------------|-------------------------------|---|---|---|---------------------------------------|
| Fill in this | s information to identify your c | ase: | | | | |
| Debtor 1 | Isabel | | Duenas | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if | First Name | Middle Name | Last Name | | | |
| United S | tates Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case nur | mber | | | | | |
| ` ′ | | | | | | Chook if this is an |
| Offic | ial Form 106D | | | | | Check if this is an amended filing |
| Sche | edule D: Credit | tors Who Ha | ve Claims Secure | ed by Prop | erty | 12/15 |
| more spa | | | le are filing together, both are equantle nber the entries, and attach it to t | | | |
| 1. Do | any creditors have claims | secured by your proper | rty? | | | |
| ~ | No. Check this box and sub | mit this form to the court | with your other schedules. You hav | e nothing else to repo | rt on this form. | |
| | Yes. Fill in all of the information | on below. | | | | |
| Part 1: | List All Secured Claims | | | | | |
| for e | | editor has a particular claim | red claim, list the creditor separately, list the other creditors in Part 2. As g to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 23 of 75

| HIII | in this infor | mation to identify your c | ase: | | | | | |
|-----------------------|---|---|---|---|---|---|--|---|
| Deb | otor 1 | Isabel | | Duenas | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | otor 2 | | | | | | | |
| (Spc | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Uni | ted States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| _ | | | | (State) | | | | |
| | se number lown) | | | | | | | |
| <u> </u> | | orm 106E/F | | | | Ch | eck if this is ar | n amended filing |
| | | | | | | | | |
| Sc | chedu | ule E/F: Cre | ditors Who | Have Unsec | cured Claims | | | 12/15 |
| othe Forn clair | er party to a n 106A/B) a ms that are entries in t wn). | any executory contracts and on Schedule G: Exe e listed in Schedule D: C | s or unexpired leases that cutory Contracts and Une creditors Who Hold Claims tach the Continuation Pa | could result in a claim. A expired Leases (Official Fo Secured by Property. If I | and Part 2 for creditors wit Also list executory contracts orm 106G). Do not include a more space is needed, copy op of any additional pages, v | on <i>Sched</i> ny credito the Part y | ule A/B: Propressive of the color of the col | perty (Official ally secured it out, number |
| 1. | Do any c | reditors have priority un | secured claims against y | ou? | | | | |
| | √ No. (| Go to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, idea As much Continuat | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priori in alphabetical order accor e than one creditor holds a | ty and nonpriority amounts ding to the creditor's name. particular claim, list the othe | | both priorit | y and nonpric | rity amounts. |
| | (For an ex | planation of each type of | claim, see the instructions | for this form in the instruction | on booklet.) | | | |
| | | | | | | Total | Priority | Nonnriority |

claim

amount

amount

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 24 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **V** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 City of Chicago - Parking and red Light Tickets \$2,700.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a Department of Revenue - PO Box 88292 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Parking tickets Is the claim subject to offset? No Yes **DIVERSIFIED CONSULTANT** \$1.215.00 Last 4 digits of account number 6387 Nonpriority Creditor's Name When was the debt incurred? 10/2017 10550 DEERWOOD PARK BLVD Number Street As of the date you file, the claim is: Check all that apply. Contingent JACKSONVILLE Florida 32256 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: SPRINT **✓** No Yes ENHANCED RECOVERY CO L 4.3 \$1,276.00 Last 4 digits of account number 8408 Nonpriority Creditor's Name When was the debt incurred? 10/2016 8014 BAYBERRY RD Number Street As of the date you file, the claim is: Check all that apply. Contingent JACKSONVILLE Florida 32256 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? |✓| ORIGINAL CREDITOR: AT T No MOBILITY Other. Specify Yes

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 25 of 75

 Debtor 1 First Name
 Isabel
 Duenas
 Case number (if known)

 Last Name
 Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | Page | |
|--------|---|---|-------------|
| | After listing any entries on this page, number them beginning wit | h 4.5, followed by 4.6, and so forth. | Total claim |
| 4.4 | ENHANCED RECOVERY CO L Nonpriority Creditor's Name 8014 BAYBERRY RD Number Street | Last 4 digits of account number 4434 When was the debt incurred? 4/2018 As of the date you file, the claim is: Check all that apply. | \$1,066.00 |
| | JACKSONVILLE Florida 32256 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: PEOPLE Other. Specify GAS LIGHT AND COKE COMP | |
| 4.5 | Great American Finance Nonpriority Creditor's Name 11380 Prosperity Farms Rd Ste 221 Number Street Palm Bch Gdns Florida 33410 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes | When was the debt incurred? 6/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 012 InstallmentLoan | \$1,552.00 |
| 4.6 | PORTFOLIO RECOV ASSOC Nonpriority Creditor's Name PO Box 41067 Number Street Norfolk Virginia 23541 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes | Hast 4 digits of account number | \$785.00 |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 26 of 75

 Debtor 1 First Name
 Isabel
 Duenas
 Case number (if known)

 Last Name
 Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuat | tion Page | |
|--------|---|---|-------------|
| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | PORTFOLIO RECOV ASSOC | — Last 4 digits of account number 2829 | \$600.00 |
| | Nonpriority Creditor's Name PO Box 41067 | When was the debt incurred? 7/2015 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Norfolk Virginia 23541 | — Unliquidated | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify001 UnknownLoanType | |
| | ✓ No | | |
| | Yes | | |
| 4.8 | SOUTHWEST CREDIT SYSTE Nonpriority Creditor's Name | Last 4 digits of account number 1051 | \$58.00 |
| | 5910 W PLANO PKWY STE 10 Number Street | When was the debt incurred? 3/2018 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | PLANO Texas 75093 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts 001 Collection; Collecting for | |
| | ✓ No | Other. Specify ORIGINAL CREDITOR: COM ED | |
| | Yes | | |
| 4.9 | T-Mobile Bankruptcy Team | — Last 4 digits of account number | \$350.00 |
| | Nonpriority Creditor's Name PO Box 53410 | When was the debt incurred? n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Bellevue Washington 98015 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Other. Specify Cellphone Bills | |
| | ✓ No | | |
| | Yes | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 27 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** WESTLAKE FINANCIAL SVC 4.10 \$580.00 Last 4 digits of account number 7070 Nonpriority Creditor's Name 4751 WILSHIRE BLVD STE 1 When was the debt incurred? 2/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent LOS ANGELES California 90010 Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 035 Automobile Other. Specify ___ Is the claim subject to offset? **✓** No Yes

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 28 of 75

| Debte | or 1 Isabel First Name | | Middle Name | Duenas Last Name | Case n | umber (if known) |
|-------|---------------------------|--|---|---------------------|---|--|
| Part | 3: List Other | s to Be Notified A | About a Debt That | t You Already List | ed | |
| 0 | collection agen | icy is trying to colle icy here. Similarly, i | ct from you for a de f you have more tha | bt you owe to some | one else, list the o ny of the debts tha | u already listed in Parts 1 or 2. For example, if a riginal creditor in Parts 1 or 2, then list the tyou listed in Parts 1 or 2, list the additional r 2, do not fill out or submit this page. |
| | HARRIS & HARF | RIS LTD | | On which ent | ry in Part 1 or Part | t 2 did you list the original creditor? |
| | 111 W JACKSO | N BLVD S-400 | | Line 4.1 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| | Number Stre | eet | | | one): | Part 2: Creditors with Nonpriority Unsecured Claims |
| | CHICAGO | Illinois | 60604 | Last 4 digits | of account number | |
| | City | State | Zip Code | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 29 of 75

Debtor 1 | Sabel | Duenas | Case number (if known) | First Name | Middle Name | Last Name | Case number (if known) | Case

| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | | |
|--------------------------|---|-------|------------------------------------|--------------------|
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for s | tatistical reporting purposes only | y. 28 U.S.C. §159. |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$10,182.00 | |
| | 6i. Total. Add lines 6f through 6i. | 6i. | \$10,182.00 | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 30 of 75

| Debtor 1 | Isabel | | Duenas | |
|---------------------|---------------------------|-------------|----------------------|--|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number | | | | |
| | | | (State) | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 31 of 75

| | | | Do | Cument | i age or | 0175 |
|-----------------------|-----------|---------------------------------------|--|--------------------|----------------|--|
| Fill in thi | s inform | nation to identify your ca | ase: | | | |
| Debtor 1 | | Isabel | | Duenas | | |
| | | First Name | Middle Name | Last Na | ne | _ |
| Debtor 2 | | | | | | _ |
| (Spouse, if | filing) | First Name | Middle Name | Last Na | ne | |
| United S | States Ba | nkruptcy Court for the: | Northern | District of Illin | ois | |
| | | | | (Sta | ate) | _ |
| Case nu (If known) | mber | | | | | _ |
| | | | | | | Check if this is an |
| | | | | | | amended filing |
| Offic | ial F | Form 106H | | | | |
| | | | | | | |
| Sche | dule | H: Your Cod | ebtors | | | 12/15 |
| Codebto | rs are n | eonle or entities who s | are also liable for any de | hts vou may hay | e Reascomr | plete and accurate as possible. If two married people are |
| | - | • | | | | is needed, copy the Additional Page, fill it out, and number |
| | | | ach the Additional Page | to this page. C | n the top of a | ny Additional Pages, write your name and case number (if |
| known). | Answer | every question. | | | | |
| 1. Do | vou hav | e anv codebtors? (If vo | u are filing a joint case, do | not list either sp | ouse as a code | btor.) |
| | No | , , , , , , , , , , , , , , , , , , , | 3 mj | | | , |
| | Yes | | | | | |
| _ L_ | | last O areas have a second | P 4 C | | | and the second of the second section and the section and the second section and the section and the second section and the section a |
| | | | iived in a community pro ico, Puerto Rico, Texas, W | | | munity property states and territories include Arizona, California, |
| ✓ | | o to line 3. | 100, 1 00,10 1,100, 10,100, 11 | aog.o, aa . | | |
| | | | r spouse, or legal equiva | lent live with vo | ı at the time? | |
| Ц | | | opodoo, or logar oquiva | ione iivo wian yo | actio ano. | |
| | | - | , atata ar tarritary did ya | ı livo? | F:: | I in the name and current address of that person. |
| | П, | es. III WHICH COMINUM | y state or territory and you | ı iive : | ГІ | in the name and current address of that person. |
| | | Name of constant of | | : | | |
| | | name of your spouse, it | ormer spouse, or legal equ | ivalerit | | |
| | | Number Street | | | | |
| | | | | | | |
| | | City | State | | Zip Code | |
| | | | | | | |
| უ. In C | olumn | 1, list all of your codeb | tors. Do not include you | r spouse as a co | debtor if your | spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 32 of 75

| | | | | 5 | | _ | |
|--|---|--|------------------|--------------------------|------------|--------------|--|
| Fill in this inf | ormation to identify | your case: | | | | | |
| Debtor 1 | Isabel | | Duena | s | | | |
| 1 | First Name | Middle Name | Last N | ame | | Che | ck if this is: |
| Debtor 2 (Spouse, if filing) | Firet Name | Middle Name | Last N | ama | | \Box | An amended filing |
| | | | | | | | A supplement showing post-petition chapter 1: |
| United States I the: | Bankruptcy Court for | Northern | District of Illi | nois tate) | | | expenses as of the following date: |
| Case number | | | (0 | iai c) | | | |
| (lf known) | | | | | | | MM / DD / YYYY |
| Official I | orm 106I | | | | | | |
| Schedul | e I: Your In | come | | | | | 12/1 |
| information a spouse. If mo number (if kn | bout your spouse. I | f you are separated and, , attach a separate she y question. | d your spous | se is no | t filing w | ith you, do | r spouse is living with you, include not include information about your onal pages, write your name and case |
| • | r employment | | Debtor 1 | | | | Debtor 2 |
| informatio | n. | Employment status | Cal Emple | | | | □ Frankrund |
| • | more than one job, | zmproymont otatao | | ✓ Employed Not Employed | | | Employed |
| attach a separate page with information about additional | | | I NOT EI | прюуеа | | | Not Employed |
| employers. | | Occupation | Self-emplo | Self-employment | | | |
| • | t time, seasonal, or | Employer's name | | | | | |
| self-employ | /ed work. | Employer's address | | | | | |
| • | n may include student aker, if it applies. | | Number Str | eet | | | Number Street |
| | | | City | | State | Zip Code | City State Zip Code |
| | | How long employed there? | | | | | |
| Part 2: Giv | e Details About N | onthly Income | | | | | |
| spouse unles If you or your | s you are separated. | e more than one employer, | - | | - | employers fo | write \$0 in the space. Include your non-filing or that person on the lines below. If you need For Debtor 2 or non-filing spouse |
| | | ary, and commissions (before a calculate what the monthly | | 2. | | \$0.00 | |
| 3. Estimate | e and list monthly over | time pay. | | 3 | | + \$0.00 | |
| 4. Calculat | e gross income. Add li | ne 2 + line 3. | | 4. | | \$0.00 | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 33 of 75

| Debto | r 1Isabel Duer First Name Middle Name Last | nas Name | Case numbe | r <i>(if</i> | |
|-----------------------|---|------------------|----------------------------|-----------------------------------|-------------------------|
| | riist name Last | Name | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Сор | y line 4 here | → 4. ¯ | \$0.00 | | |
| 5. List | all payroll deductions: | | | | |
| 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$0.00 | | |
| 5b. | Mandatory contributions for retirement plans | 5b. | \$0.00 | | |
| 5c. | Voluntary contributions for retirement plans | 5c. | \$0.00 | | |
| 5d. | Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. | Insurance | 5e. | \$0.00 | | |
| 5f. I | Domestic support obligations | 5f. | \$0.00 | | |
| 5g. | Union dues | 5g. | \$0.00 | - | |
| 5h. | Other deductions. Specify: | 5h. + | \$0.00 + | | |
| 6. Add +5h. | the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5$ | 5g 6. | \$0.00 | | |
| 7. Calc | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$0.00 | | |
| 8. List | all other income regularly received: | | | | |
| | Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing | | | | |
| | gross receipts, ordinary and necessary business expenses, and | | A .400.00 | | |
| | the total monthly net income. | 8a. | \$400.00 | | |
| | Interest and dividends | 8b. | \$0.00 | | |
| | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, | | | | |
| | divorce settlement, and property settlement. | 8c. | \$1,200.00 | | |
| 8d. | Unemployment compensation | 8d. | \$0.00 | | |
| 8e. | Social Security | 8e. | \$0.00 | | |
| | Other government assistance that you regularly receive include cash assistance and the value (if known) of any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or nousing subsidies Specify: Food Assistance Programs Income | 8f. | \$300.00 | | |
| 8g. | Pension or retirement income | 8g. | \$0.00 | | |
| 8h. | Other monthly income. Specify: | 8h. + | \$0.00 + | | |
| 9. Add | all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h | ı. 9. | \$1,900.00 | | |
| | culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spous | 10. | \$1,900.00 | - = | \$1,900.00 |
| Incl frien | ate all other regular contributions to the expenses that you lisude contributions from an unmarried partner, members of your hourds or relatives. In the include any amounts already included in lines 2-10 or amounts | usehold, your c | lependents, your roomr | | |
| Spe | cify: | | | 11. | + \$0.00 |
| | d the amount in the last column of line 10 to the amount in line | | | | \$1,900.00 |
| vvrit | e that amount on the Summary of Schedules and Statistical Summ | ary or Gertain L | .iaviiilies ähu meläled Dä | аа, п к аррпез | Combined monthly income |
| 13. Do | you expect an increase or decrease within the year after you No. Yes. Explain: | file this form? | , | | |
| | 1 | | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 34 of 75

| Debtor 1Isabel | Due | Duenas | | Case number (if | | |
|---|-----------------------|---------------|--------------|-----------------|--|---|
| First Name Middle Na | me Last | t Name | | known) | | _ |
| Official Form 106l. Additional pag | <u>e.</u> | | | | | |
| 8a.Net income from rental property and from ope | erating a business, p | profession, o | r farm | | | |
| 8a.1 Maintenance for Bobby | Debtor 1 | Debtor 2 | | | | |
| Gross receipts (before all deductions) | \$400.00 | | | | | |
| Ordinary and necessary operating expenses | - <u>\$0.00</u> | | | | | |
| Net monthly income from a business, profession | , or farm \$400.00 | | Copy here | \$400.00 | | |

Official Form 106l Schedule I: Your Income page 3

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 35 of 75

| Fill in this infor | mation to identify | your case: | | | | |
|--|---|---|--|------------------------|--|--------------|
| Debtor 1 | Isabel | | Duenas | | | |
| | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filir | ng | |
| | | for the: Northern | District of Illinois | | howing post-pet the following dat | • |
| Case number | | | (State) | expenses as on | ine following dat | ie. |
| (If known) | - | | | MM / DD / YYYY | | |
| Official | Form 10 | <u>6J</u> | _ | | | |
| Schedul | e J: Your | Expenses | | | | 12/15 |
| information. If (if known). Ans Part 1: Des 1. Is this a joi | more space is no swer every questi cribe Your Hou int case? to to line 2 oes Debtor 2 live | | s form. On the top of any additiona | al pages, write your n | | number |
| 2. Do you hav | e dependents? | No | | | | |
| Do not list I Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 Child Child | Dependent's age | Does dependently with you? No. Yes. No. Yes. | dent live |
| 3. Do your ex | penses include | | | | | |
| | f people other | ✓ No | | | | |
| than yourself an dependent | - | Yes | | | | |
| Part 2: Esti | mate Your Ond | going Monthly Expenses | | | | |
| Estimate you | r expenses as of of a date after th | your bankruptcy filing date unless e bankruptcy is filed. If this is a su | | • | • | |
| | • | h non-cash government assistance luded it on <i>Schedule I: Your Incom</i> | • | | Y | our expenses |
| | I or home owners or the ground or lo | ship expenses for your residence. Int. 4. | nclude first mortgage payments and | | 4. | \$700.00 |
| If not inc | luded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |
| 4b. Prope | rty, homeowner's | , or renter's insurance | | | 4b. | \$0.00 |
| 4c. Home | maintenance, rep | air, and upkeep expenses | | | 4c. | \$0.00 |

4d.

\$0.00

4d. Homeowner's association or condominium dues

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 36 of 75

 Debtor 1 First Name
 Isabel
 Duenas
 Case number (if known)

 Last Name
 Last Name

| First Name | Middle Name Last Name | | |
|--|--|-----------|---------------|
| | | | Your expenses |
| 5. Additional mortgage payme | ents for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural g | as | 6a. | \$200.00 |
| 6b. Water, sewer, garbage co | ollection | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Ir | nternet, satellite, and cable services | 6c. | \$0.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping su | pplies | 7. | \$479.00 |
| 8. Childcare and children's ed | ducation costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry | cleaning | 9. | \$100.00 |
| 10. Personal care products a | nd services | 10. | \$100.00 |
| 11. Medical and dental expen | nses | 11. | \$65.00 |
| 12. Transportation. Include ga | s, maintenance, bus or train fare. ts | 12. | \$200.00 |
| 13. Entertainment, clubs, rec | reation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions a | and religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance dec | ducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$56.00 |
| 15d. Other insurance. Specif | ý; <u> </u> | 15d | \$0.00 |
| 16. Taxes. Do not include taxes | s deducted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease paym | nents: | | |
| 17a. Car payments for Vehic | le 1 | 17a | \$0.00 |
| 17b. Car payments for Vehic | ele 2 | 17b | \$0.00 |
| 17c. Other. Specify: | | 17c | \$0.00 |
| 17d. Other. Specify: | | 17d | \$0.00 |
| | , maintenance, and support that you did not report as deducted from | | \$0.00 |
| , , , | ule I, Your Income (Official Form 106I). | 18. | |
| Specify: | to support others who do not live with you. | 10 | #0.00 |
| - | ses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | 19. | \$0.00 |
| 20a. Mortgages on other pro | | e. 20a | \$0.00 |
| 20b. Real estate taxes. | | 20b | \$0.00 |
| 20c. Property, homeowner's | s, or renter's insurance | 20c | \$0.00 |
| 20d. Maintenance, repair, an | | 20d | \$0.00 |
| 20e. Homeowner's associati | | 20e | \$0.00 |
| | | 206 | Ψ0.00 |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 37 of 75

| Debtor 1 Isabel | | Duenas | Case number (if known) | | |
|-------------------------|--|--------------------------------------|------------------------|-----|------------|
| First Na | me Middle Name | Last Name | | | |
| 21. Other. Speci | fy: | | | 21 | \$0.00 |
| 22. Calculate y | our monthly expenses. | | | | \$1,900.00 |
| 22a. Add line | s 4 through 21. | | | | \$0.00 |
| 22b. Copy lir | e 22 (monthly expenses for Debtor 2 |), if any, from Official Form 106J-2 | | | \$1,900.00 |
| 22c. Add line | 22a and 22b. The result is your mon | thly expenses. | | 22. | |
| 23. Calculate yo | our monthly net income. | | | | |
| 23a. Copy lin | e 12 (your combined monthly incom | e) from Schedule I. | | 23a | \$1,900.00 |
| 23b. Copy yo | our monthly expenses from line 22 ab | ove. | | 23b | \$1,900.00 |
| | your monthly expenses from your m | onthly income. | | | \$0.00 |
| The res | ult is your monthly net income. | | | 23c | |
| For example | ect an increase or decrease in you e, do you expect to finish paying for y ayment to increase or decrease becau Explain here: | our car loan within the year or do y | ou expect your | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 38 of 75

| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|
| Debtor 1 | Isabel | | Duenas | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | | | (Otato) | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Isabel Duenas | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 10/23/2018 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 39 of 75

| | n this infor | mation to identify your | case: | | | | |
|-----------------|--|--|----------------------|---------------------------------------|---|---|--------------------------------|
| Debt | or 1 | Isabel | | Duenas | | | |
| Debi | .01 1 | First Name | Middle | | <u>e</u> | | |
| Debt (Spor | or 2 se, if filing) | First Name | Middle | Name Last Nam | <u> </u> | | |
| (- | | riist Name | Middle | Name Last Nam | e | | |
| Unite | ed States B | Bankruptcy Court for the | e: Northern | District of Illino | | | |
| Case (If kno | e number wn) | | | (Stat | e) | | |
| Of | ficial | Form 107 | | | | | ck if this is a nded filing |
| Sta | teme | nt of Financi | al Affairs 1 | for Individuals | Filing for Bankru | ptcy | 04/1 |
| infor | mation. It | | ded, attach a sep | | | esponsible for supplying corre al pages, write your name and | |
| Part | 1: Give | Details About You | r Marital Status | and Where You Lived | Before | | |
| 1. | What is | your current marital | status? | | | | |
| | | rried married | | | | | |
| 2. | During t | he last 3 years, have | vou lived anvwher | e other than where you liv | ve now? | | |
| | ☐ No ✓ Yes | s. List all of the places | you lived in the las | st 3 years. Do not include v | where you live now. | | |
| | | | | | | | |
| | Deb | otor 1: | | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor there | r 2 lived |
| | Deb | otor 1: | | | Debtor 2: Same as Debtor 1 | | |
| | 745 | otor 1: 62 S. Camino Coicoim nber Street | | there From <u>09/2016</u> | | there Same as | |
| | 745 | 2 S. Camino Coicoim nber Street | 85752 Zip Code | there | Same as Debtor 1 | there Same as | |
| | 745 Nun Tuc | 2 S. Camino Coicoim nber Street | | there From <u>09/2016</u> | Same as Debtor 1 Number Street | there Same as From To | Debtor 1 |
| | 745 Nun Tuc City | 2 S. Camino Coicoim nber Street son Arizona State | | there From <u>09/2016</u> | Same as Debtor 1 Number Street City State Same as Debtor 1 | there Same as From To Zip Code | Debtor 1 |
| | 745 Nun Tuc City | 2 S. Camino Coicoim nber Street son Arizona State | | From 09/2016 To 05/2017 | Same as Debtor 1 Number Street City State | there Same as From To Zip Code Same as | Debtor 1 |
| | 745 Nun Tuc City 485 Nun First | 2 S. Camino Coicoim nber Street son Arizona State 3 S. May nber Street | | From 09/2016 To 05/2017 From 01/2007 | Same as Debtor 1 Number Street City State Same as Debtor 1 | there Same as From To Zip Code Same as From From | Debtor 1 |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 40 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, $\overline{\mathbf{A}}$ Wages, \$400.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages. Wages. For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$27000.00 For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and exclusions) and exclusions) 2018 Estimated Child From January 1 of current year until \$1,200.00 Support the date you filed for bankruptcy: 2018 Estimated LINK \$3,000.00 2017 Estimated Child For last calendar year: Support \$7,200.00 (January 1 to December 31, \$0.00 \$0.00 For the calendar year before that: \$0.00 (January 1 to December 31, 2016 YYYY

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 41 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 42 of 75

| r 1 | Isabel | | | | ienas | Case number | (if known) |
|------------|---|--|--|--|--|--|--|
| | First Name | | Middle Name | La | st Name | | |
| nsi orp | ders include your porations of which | relatives; a you are a for a busin | iny general partner in officer, director, less you operate a | s; relatives of any person in control | general partners; par , or owner of 20% o | tnerships of which y r more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to a | an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | nin 1 year before der? | you filed | for bankruptcy, | did you make an | y payments or tran | sfer any property o | on account of a debt that benefited an |
| | | debts gua | ranteed or cosigne | ed by an insider. | | | |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments tha | t benefited an ins | sider. | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | | | | , , | · | | Include creditor's name |
| | Insider's Name | | | | <u> </u> | | |
| | Niversia au Chuant | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | <u> </u> | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 43 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code

Property was attached, seized, or levied.

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 44 of 75

| Debt | | Isabel First Name N | liddle Name | Duenas Last Name | Case number (if known) | | |
|------|----------|---|-------------|------------------------------|------------------------------|--------------------------|--------------------|
| 11. | | thin 90 days before you filed for l counts or refuse to make a paym | | | nk or financial institution, | set off any amour | its from your |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | | | | Describe the action the | creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | Last 4 digita of account or | ora la ave VVVV | | |
| | | | | Last 4 digits of account nu | imber. AAAA- | | |
| | | City State | Zip Code | | | | |
| 12. | | hin 1 year before you filed for ba cointed receiver, a custodian, or | | of your property in the po | ossession of an assignee fo | r the benefit of c | reditors, a court- |
| | ✓ | No Yes | | | | | |
| Part | 5: | List Certain Gifts and Contr | ibutions | | | | |
| 13. | | thin 2 years before you filed for | | ou give any gifts with a tot | al value of more than \$600 | per person? | |
| | <u>~</u> | No Yes. Fill in the details for each | gift. | | | | |
| | | Gifts with a total value of more per person | _ | Describe the gifts | | Dates you gave the gifts | Value |
| | | Person to Whom You Gave the G | :::: | | | | |
| | | Person to whom you gave the G | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to you | | | | | |
| | | Person to Whom You Gave the G | ift | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to you | | | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 45 of 75

| ebtor 1 | Isabel | Duenas | Case number (if knov | vn) | |
|--------------|--|--|---|--------------------------------------|---------------------|
| | First Name Middle N | lame Last Name | · · | | |
| | | | | | |
| . Wit | hin 2 years before you filed for bankru | ıptcy, did you give any gifts or contr | ibutions with a total value | of more than \$600 | to any charity? |
| | No | | | | |
| \mathbf{V} | | | | | |
| Ш | Yes. Fill in the details for each gift or | contribution. | | | |
| | Gifts or contributions to charities | Describe what you co | ntributed | Date you | Value |
| | that total more than \$600 | | | contributed | |
| | · | | | | |
| | | | | | |
| | Charity's Name | | | | |
| | | | | | |
| | | | | | |
| | Number Street | | | | |
| | | | | | |
| | City State Zip (| Code | | | |
| | • | | | 1 | |
| t 6: | List Certain Losses | | | | |
| | | | | | |
| Wi+ | hin 1 year before you filed for bankrup | stoy or since you filed for hankrunto | v did vou lose anything ber | sauce of theft fire | other disaster or |
| | nbling? | noy or since you med for bunkingto | y, did you lose anything bec | dusc of their, me, | other disaster, or |
| - gui | | | | | |
| ✓ | No | | | | |
| 一同 | Yes. Fill in the details. | | | | |
| | | | | | |
| | Describe the property you lost and | | e coverage for the loss | Date of your | Value of property |
| | how the loss occurred | | t insurance has paid. List as on line 33 of <i>Schedule</i> | loss | lost |
| | | A/B: Property. | is on line 33 of <i>Scriedule</i> | | |
| | | AVB. Floperty. | | | |
| | | | | | |
| | List Certain Payments or Transfe | | | | |
| abo | nin i year before you filed for bankrup out seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition p | | | | anyone you consulte |
| abo | ut seeking bankruptcy or preparing a | bankruptcy petition? | | | anyone you consulte |
| abo | out seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition p No | bankruptcy petition? | | | anyone you consulte |
| abo | out seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition pr | bankruptcy petition? reparers, or credit counseling agencies | for services required in your b | ankruptcy. | |
| abo | out seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition p No | bankruptcy petition? reparers, or credit counseling agencies Description and value | for services required in your b | ankruptcy. Date payment | Amount of |
| abo | out seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition p No | bankruptcy petition? reparers, or credit counseling agencies | for services required in your b | ankruptcy. Date payment or transfer | |
| abo | out seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition po No Yes. Fill in the details. | bankruptcy petition? reparers, or credit counseling agencies Description and value transferred | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | out seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition properties. No Yes. Fill in the details. Semrad Law Firm | bankruptcy petition? reparers, or credit counseling agencies Description and value | for services required in your b | ankruptcy. Date payment or transfer | Amount of |
| abo | out seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition properties. No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | bankruptcy petition? reparers, or credit counseling agencies Description and value transferred | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | nut seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition properties. No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | bankruptcy petition? reparers, or credit counseling agencies Description and value transferred | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | out seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition properties. No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | bankruptcy petition? reparers, or credit counseling agencies Description and value transferred | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | nut seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition properties. No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | bankruptcy petition? reparers, or credit counseling agencies Description and value transferred | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | sut seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street | bankruptcy petition? reparers, or credit counseling agencies Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | sut seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys, bankruptc | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | sut seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys, bankruptc | bankruptcy petition? reparers, or credit counseling agencies Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | sut seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys, bankruptc | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | seking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys, bankruptcy or preparing a ude any attorneys, bankruptcy or preparing a ude any attorneys, bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys, bankruptcy | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | seking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys bankruptcy pe | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | seking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys, bankruptcy pet | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | seking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys and support of the seking provided and support of the seking provided and support of the seking bankruptcy petition provided any attorneys and support of the seking bankruptcy petition provided any attorneys attorneys and support of the seking bankruptcy petition provided any attorneys and support of the seking bankruptcy or preparing a ude any attorneys and support of the seking bankruptcy or preparing a ude any attorneys and support of the seking bankruptcy or preparing a ude any attorneys and support of the seking bankruptcy or preparing a ude any attorneys bankruptcy petition provided any attorneys and support of the seking bankruptcy or preparing a support of the seking bankruptcy or provided any attorneys attorney | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | seking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys, bankruptcy pet | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 606 City State Zip 0 Email or website address None Person Who Made the Payment, if Not | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | seking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys and support of the seking provided and support of the seking provided and support of the seking bankruptcy petition provided any attorneys and support of the seking bankruptcy petition provided any attorneys attorneys and support of the seking bankruptcy petition provided any attorneys and support of the seking bankruptcy or preparing a ude any attorneys and support of the seking bankruptcy or preparing a ude any attorneys and support of the seking bankruptcy or preparing a ude any attorneys and support of the seking bankruptcy or preparing a ude any attorneys bankruptcy petition provided any attorneys and support of the seking bankruptcy or preparing a support of the seking bankruptcy or provided any attorneys attorney | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 606 City State Zip 0 Email or website address None Person Who Made the Payment, if Not | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 606 City State Zip 0 Email or website address None Person Who Made the Payment, if Not Person Who Was Paid | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | sut seeking bankruptcy or preparing a ude any attorneys, bankruptcy petition provided any attorneys and support of the seeking person who was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 606 City State Zip of Email or website address None Person Who Made the Payment, if Not Person Who Was Paid Number Street | Description and value transferred Attorney's Fee - 500.00 | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 606 City State Zip 0 Email or website address None Person Who Made the Payment, if Not Person Who Was Paid | Description and value transferred Attorney's Fee - 500.00 You | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 606 City State Zip 0 Email or website address None Person Who Made the Payment, if Not Person Who Was Paid | Description and value transferred Attorney's Fee - 500.00 You | for services required in your b | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 606 City State Zip 0 Email or website address None Person Who Was Paid Number Street City State Zip 0 City State Zip 0 | Description and value transferred Attorney's Fee - 500.00 You Code | for services required in your b | Date payment or transfer was made | Amount of payment |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 46 of 75

| Debto | r 1 Isabel | Duenas Cas | e number <i>(if known)</i> | |
|---------|--|---|---|------------------------------|
| | First Name Middle Name | Last Name | | |
| h C | Within 1 year before you filed for bankruptcy, did y help you deal with your creditors or to make payn Do not include any payment or transfer that you listed | nents to your creditors? | If pay or transfer any property to a | anyone who promised to |
| | Yes. Fill in the details. | | | |
| | | Description and value of any prope transferred | payment or transfer was made | Amount of payment |
| | Person Who Was Paid | - | | |
| | Number Street | | | |
| | City State Zip Code | - | | |
| t Ii | Within 2 years before you filed for bankruptcy, did the ordinary course of your business or financial a include both outright transfers and transfers made as and transfers that you have already listed on this state. No Yes. Fill in the details. | offairs? security (such as the granting of a security | | |
| L | | Description and value of property transferred | Describe any property or payments received or debts p in exchange | Date transfer was made |
| | Person Who Received Transfer | - | | |
| | Number Street | | | |
| | City State Zip Code Person's relationship to you | - | | |
| | Person Who Received Transfer | - | | |
| | Number Street | - | | |
| | City State Zip Code Person's relationship to you | - | | |
| b | Within 10 years before you filed for bankruptcy, dibeneficiary? (These are often called asset-protection devices.) | d you transfer any property to a self-se | ttled trust or similar device of whi | ch you are a |
| ١ | ✓ No ✓ Yes Fill in the details | | | |
| L | Yes. Fill in the details. | Description and value of the prop | erty transferred | Date transfer was made |
| | Name of trust | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 47 of 75

Debtor 1 Isabel Duenas Case number (if known) First Name Middle Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code

City

State

Zip Code

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 48 of 75

Debtor 1 Isabel Duenas Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 49 of 75

| Deb | tor 1 | | | | | enas | Ca | se number (i | fknown) | | |
|------|----------|---|-----------------|-----------------|----------------|----------------|------------------|----------------|--------------------------------------|------------|--------------------|
| | | First Name | | Middle Name | Las | t Name | | | | | |
| 26. | Hav | e you been a party | y in any judici | al or administ | rative procee | eding under | any environme | ntal law? In | clude settlements a | and orders | s. |
| | | No Yes. Fill in the det | ails. | | | | | | | | |
| | | | | | Court or age | ency | | Nature | of the case | | Status of the case |
| | | Case title | | | Court Name | | | | | | Pending |
| | | Case number | | | NumberStree | et | | | | | On appeal |
| | | | | | City | State | Zip Code | | | | Concluded |
| Part | t 11: | Give Details Ab | out Your B | usiness or Co | onnections | to Any Bu | siness | | | | |
| 27. | Witl | nin 4 years before | you filed for b | ankruptcy, did | d you own a l | business or | have any of the | following o | onnections to any b | ousiness? | |
| | | | | | | | activity, either | full-time or p | oart-time | | |
| | | A member of A partner in a | | lity company (I | LC) or limite | d liability pa | artnership (LLP) | | | | |
| | | An officer, die | rector, or mar | aging executiv | - | | | | | | |
| | | An owner of a | at least 5% of | the voting or e | equity securit | ies of a corp | poration | | | | |
| | V | No. None of the a Yes. Check all tha | | | | w for each h | ou jeineee | | | | |
| | Ш | 103. Officer all the | at apply abov | | | | ure of the busin | ess | Employer Identific | | |
| | | | | | | | | | include Social Se | curity nun | nber or ITIN. |
| | | Business Name | | | | | | | EIIN. | | |
| | | Number Street | | | Name | of account | ant or bookkee | per | Dates business ex | xisted | |
| | | City | State | Zip Code | | | | | From1 | Го | |
| | | | | | | | | | | | |
| | | | | | Descr | ibe the natu | are of the busin | ess | Employer Identification | | |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates business ex | xisted | |
| | | City | State | Zip Code | Name | of account | ant or bookkee | per | From 1 | Γο | |
| | | • | | , | | | | | 1101111 | | |
| | | | | | | | | | | | |
| | | | | | Descr | ibe the natu | ure of the busin | ess | Employer Identific include Social Se | | |
| | | Business Name | | | _ | | | | EIN: | | |
| | | Number Street | | | — Name | of account | ant or bookkee | per | Dates business ex | xisted | |
| | | City | State | Zip Code | _ | | | | From 1 | Го | <u> </u> |
| | | | | | | | | | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 50 of 75

| Deb | tor 1 | Isabel | | | Duenas | Case number (if known) |
|-----|--------|---|-----------------|---|---|--|
| | | First Name | | Middle Name | Last Name | |
| 28. | cred | nin 2 years bet ditors, or other No | - | r bankruptcy, did yo | u give a financial statement | t to anyone about your business? Include all financial institutions, |
| | Ħ | | details below. | | | |
| | _ | | | | Date issued | |
| | | | | | | |
| | | Name | | | MM/DD/YYYY | |
| | | Number Stre | eet | | • | |
| | | | | | | |
| | | City | State | Zip Code | | |
| Par | t 12: | Sign Below | | | | |
| 1 | true a | ınd correct. I ı | understand tha | t making a false stat ies up to \$250,000, o | ement, concea ^l ing property or imprisonment for up to 20 | nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | Sig | nature of Debto | | | Signature of Debtor 2 |
| | | Da | ite 10/23/2018 | | | Date |
| | ✓ N | lo 'es | | | Financial Affairs for Individu | nals Filing for Bankruptcy (Official Form 107)? |
| | ✓ N | lo | | | | |
| | ☐ Y | es. Name of pe | erson | | | Attach the Bankruptcy Petition Preparer's Notice, |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 51 of 75

| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|----------------------|---|--|
| Debtor 1 | Isabel | | Duenas | | |
| | First Name | Middle Name | Last Name | , | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number (If known) | - | | (State) | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors I information below. | s Who Have Claims Secured by Property (Official Form 106D), fill in the | | | | |
|----|---|--|---|--|--|--|
| | Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and | No. Yes. | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 52 of 75

| ebtor Is | sabel | | Duenas | Case number (if |
|----------------|----------------------------|--------------------------|--------------------------|---|
| _ | irst Name | Middle Name | Last Name | known) |
| rt 2: L | ist Your Unexpire | d Personal Property Leas | ses | |
| ormatio | on below. Do not list | | d leases are leases that | y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). |
| Desci | ribe your unexpired p | personal property leases | | Will the lease be assumed? |
| Lesso | or's name: | | | □ No □ Yes |
| Descr | iption of leased erty: | | | _ |
| Lesso | or's name: | | | □ No □ Yes |
| Descr prope | iption of leased erty: | | | |
| Lesso | or's name: | | | □ No □ Yes |
| Descr | iption of leased erty: | | | _ |
| Lesso | or's name: | | | □ No □ Yes |
| Descr prope | iption of leased erty: | | | |
| Lesso | or's name: | | | □ No □ Yes |
| Descr | iption of leased erty: | | | |
| Lesso | or's name: | | | □ No □ Yes |
| Descr prope | iption of leased erty: | | | |
| Lesso | or's name: | | | □ No □ Yes |
| Descr | iption of leased erty: | | | _ |
| t 3: S | ign Below | | | |
| Under | | | I my intention about any | property of my estate that secures a debt and any personal |
| X /s | / Isabel Duenas | | × | |
| | nature of Debtor 1 | | | nature of Debtor 2 |
| Date | e 10/23/2018 MM/DD/YYYY | | Da | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Page 53 of 75 Document

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Distric | t of Illinois | |
|---------|---|--------------------------------------|----------------------------------|------------------------------------|
| n re | Isabel Duenas | | Case No. | |
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 7 |
| | DISCLOSURE OF C | OMPENSATION | N OF ATTORNEY | FOR DEBTOR |
| con | rsuant to 11 U.S.C. § 329(a) and Fe npensation paid to me within one yo dered or to be rendered on behalf o | ear before the filing of the p | etition in bankruptcy, or agree | d to be paid to me, for services |
| For | legal services, I have agreed to acco | ept | | \$1,000.00 |
| Pric | or to the filing of this statement I ha | ve received | | \$500.00 |
| Bal | ance Due | | | \$500.00 |
| 2. The | e source of the compensation paid t | o me was: | | |
| | ✓ Debtor | Other (specify) | | |
| 3. The | e source of the compensation paid t | o me is: | | |
| | Debtor | Other (specify) | | |
| 4. | I have not agreed to share the above members and associates of my law | ve-disclosed compensation v firm. | with any other person unless | they are |
| | I have agreed to share the above-d members or associates of my law f the people sharing in the compens | irm. A copy of the agreemer | | |
| 5. In r | eturn for the above-disclosed fee, I | have agreed to render legal | service for all aspects of the b | ankruptcy case, including: |
| | a. Analysis of the debtor's financi bankruptcy; | al situation, and rendering a | advice to the debtor in determi | ning whether to file a petition in |
| | b. Preparation and filing of any pe | etition, schedules, statemen | ts of affairs and plan which ma | ay be required; |
| | c. Representation of the debtor at | the meeting of creditors an | nd confirmation hearing, and a | ny adjourned hearings thereof; |
| 6. By | agreement with the debtor(s), the ab | oove-disclosed fee does not | t include the following services | S: |
| | | | | |
| | | CERTIFICA | TION | |
| | ify that the foregoing is a complete in this bankruptcy proceedings. | statement of any agreement | t or arrangement for payment t | to me for representation of the |
| | 10/23/2018 | | /s/ Jacob Comrov | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | _ | | Name of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1.717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 58 of 75

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Duenas, Isabel | Case No | Case No. | | |
|---------------|----------------|--|-------------------------------------|--|--|
| | Debtor(s) | | | | |
| | | Chapter. | Chapter7 | | |
| | VERIFI | CATION OF CREDITOR MAT | RIX | | |
| T knowledg | | fy that the attached list of creditors is tr | ue and correct to the best of their | | |
| Date: | 10/23/2018 | /s/ Duenas, Isabe Duenas, Isabel | el | | |
| | | Signature of Deb | ptor | | |

Great American Finance 11380 Prosperity Farms Rd Ste 221 Palm Bch Gdns, FL, 33410

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE, FL, 32256

PORTFOLIO RECOV ASSOC PO Box 41067 Norfolk, VA, 23541

WESTLAKE FINANCIAL SVC 4751 WILSHIRE BLVD STE 1 LOS ANGELES, CA, 90010

SOUTHWEST CREDIT SYSTE 5910 W PLANO PKWY STE 10 PLANO, TX, 75093

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

T-Mobile Bankruptcy Team PO Box 53410 Bellevue, WA, 98015 Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 60 of 75

| Debtor 1 Isabel | | Duenas Last Name | Case number (if known) | |
|---|--|--|---|--|
| | estions for Reporting Purposes | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or i No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts your | primarily for a person by business debts? An extended from the control of the con | sonal, family, or household Business debts are debts t agh the operation of the bu | d purpose." hat you incurred to obtain usiness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that f | 7. Do you estimate t | hat after any exempt proper e to distribute to unsecured o | ty is excluded and administrative creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5, ☐ 5,001-10 ☐ 10,001-2 | 0,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000 \$50,000 | 001-\$10 million ,001-\$50 million ,001-\$100 million 0,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| ²⁰ · How much do you estimate your liabilities to be? | | \$10,000 \$50,000 | 001-\$10 million ,001-\$50 million ,001-\$100 million 0,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | The second section of the sect | | | |
| For you | correct. If I have chosen to file under Chof title 11, United States Code. under Chapter 7. If no attorney represents me anout this document, I have obtain I request relief in accordance will understand making a false state. | napter 7, I am aware I understand the re d I did not pay or a ned and read the no ith the chapter of ti tement, concealing | e that I may proceed, if eligible available under each of gree to pay someone who otice required by 11 U.S.Cotle 11, United States Code property, or obtaining mo | e, specified in this petition. oney or property by fraud in |
| | both. 18 U.S.C. §§ 152, 1341, /s/ Isabel Duenas Signature of Debtor 1 Executed on | 1519, and 3571. | Signature of Deb | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 61 of 75

| | | 200 | amon ago | | |
|---------------------------|---|------------------------------|--|---|---|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Isabel | | Duenas | | |
| Debtor 2 | First Name | Middle Name | Last Name | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the | : Northern | District of Illinois | | |
| Case number (If known) | | | (State) | | |
| Official | Form 106D | ec | 2 | | Check if this is an amended filing |
| Declarati | on About an | Individual Debt | or's Schedule | es . | 12/15 |
| If two married p | people are filing toget | her, both are equally respon | sible for supplying corre | ect information. | |
| money or prope | erty by fraud in connections in 1519, and 3571. | ction with a bankruptcy case | or amended schedules. I | Making a false statement, concealing pairs and the state of the state | oroperty, or obtaining 20 years, or both. 18 |
| Did you pa | ay or agree to pay son | neone who is NOT an attorne | ey to help you fill out ba | nkruptcy forms? | |
| ✓ No | | | | | 4 |
| Yes. N | lame of person | · | Attach Bankruptcy Signature (Official | r Petition Preparer's Notice, Declaration, an Form 119). | nd . |
| | | | | | |
| | | | , | | |
| Under per that they | are true and correct | are that I have read the sum | mary and schedules file | d with this declaration and | |

Signature of Debtor 2

MM/DD/YYYY

Date

Signature of Debtor 1

MM/DD/YYYY

Date 10/23/2018

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 62 of 75

| Del | otor 1 Isab | | 5 | Duenas | Case number (if known) | |
|-----|----------------|---|---|------------------------------|--|-----------|
| | First | t Name | Middle Name | Last Name | | - |
| 28. | Within credito | 2 years before you filed for rs, or other parties. | bankruptcy, did you | ı give a financial stateme | ent to anyone about your business? Include all financial institu | utions, |
| | ✓ No | s. Fill in the details below. | | | | |
| | _ | | | Date issued | | |
| | Na Na | ame | i. | MM/DD/YYYY | | |
| | N | umber Street | | | | |
| | Ci | ty State | Zip Code | | | |
| Pai | t 12: Si | gn Below | | | | |
| | true and | correct. I understand that | making a false state ses up to \$250,000, o | ement, concealing proper | ents, and I declare under penalty of perjury that the answers rty, or obtaining money or property by fraud in connection wit 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 | are :h |
| | | Date 10/23/2018 | | | Date | |
| | Did you a | | Your Statement of F | inancial Affairs for Individ | duals Filing for Bankruptcy (Official Form 107)? | |
| | ✓ No Yes | ě | | | | |
| 2 5 | Did you p | oay or agree to pay someor | ne who is not an atto | orney to help you fill out b | pankruptcy forms? | |
| | √ No | | | | | |
| | Yes. | Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 63 of 75

| Debtor | Isabel | | Duenas | Case number | (if |
|---------|---|--|------------------------|----------------------------|--|
| 1 | First Name | Middle Name | Last Name | known) | |
| art 2: | List Your Unexpired | l Personal Property Leas | es | | |
| informa | ation below. Do not list i | operty lease that you listed i real estate leases. Unexpired property lease if the trustee | leases are leases that | are still in effect; the I | red Leases (Official Form 106G), fill in the ease period has not yet ended. You may |
| De | scribe your unexpired p | ersonal property leases | | | Will the lease be assumed? |
| Les | ssor's name: | | | | ☐ No ☐ Yes |
| | scription of leased | | | | |
| Les | ssor's name: | | | | ☐ No Yes |
| | scription of leased | , | | | |
| Les | ssor's name: | | | | ☐ No Yes |
| | scription of leased operty: | | | | _ |
| Les | ssor's name: | | | | ☐ No ☐ Yes |
| | scription of leased operty: | | | | |
| Les | ssor's name: | 3 | | | No ☐ Yes |
| | scription of leased perty: | | * | | , - |
| Les | ssor's name: | | | - | ☐ No ☐ Yes |
| | scription of leased perty: | | | | |
| Les | ssor's name: | | | | ☐ No ☐ Yes |
| | scription of leased | | | | |
| Unde | Sign Below er penalty of perjury, I d erty that is subject to a | eclare that I have indicated n unexpired lease. | my intention about any | property of my estate | that secures a debt and any personal |
| | /s/ Isabel Duenas | Merro | × Sig | nature of Debtor 2 | , |
| | Pate 10/23/2018 MM/DD/YYYY | | Dat | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 64 of 75

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Duenas, Isabel | Case No | Case No | | |
|--------|----------------|---|----------------------------------|--|--|
| | Debtor(s) | Chanter | Ch ontov7 | | |
| | | Chapter. | Chapter7 | | |
| | VERIFIC | CATION OF CREDITOR MATR | IIX | | |
| The | | y that the attached list of creditors is true | and correct to the best of their | | |
| | | | | | |
| Date: | 10/23/2018 | /s/ Duenas, Isabel Duenas, Isabel Signature of Debtor | 1 Dues | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 65 of 75

| Debter 1 Isabel | | D | | | | | | |
|---|--|--|----------------------------|------------------------------------|-------------|---|------|---------------------|
| Debtor 1 Isabel First Name | Middle Name | Duenas Last Name | | Case number | (if known) | | | |
| | | | | Column A Debtor 1 | | Column B Debtor 2 or non-filing spo | ouse | 9 |
| Unemployment compensation Do not enter the amount if you counder the Social Security Act. Instead | ead, list it here: | eceived was a benefit | \$ | 0.00 | | | | |
| For your spouse | | \$0.00 \$0.00 | | | | | | |
| 9.Pension or retirement income. benefit under the Social Security A | Do not include any amou ct. | unt received that was a | a \$ | 0.00 | | | 2 | |
| 10.Income from all other sources amount. Do not include any bene payments received as a victim of a international or domestic terrorism page and put the total below. | fits received under the So war crime, a crime again | cial Security Act or st humanity, or | | | | | | |
| Other Government Assistance | | | \$ | 300.00 | | · | | |
| Total amounts from separate page | es, if any. | | . +. | \$0.00 | 1 | + | | , |
| 11. Calculate your total current neach column. Then add the total for 0 | | | \$ | 1,900.00 | + | | = | \$1,900.00 |
| column. Then add the total for t | Column A to the total for | Column B. | L | | J | | | Total current |
| art 2: Determine Whether th | e Means Test Annlie | es to Vou | | | | | (6) | monthly incom |
| | | The state of the s | | | | | | |
| Calculate your current monthly 12a. Copy your total current month | | | | - | Copy line | e 11 here → | | \$1,900.00 |
| Multiply by 12 (the number of | of months in a year) | | | | , , | | L | |
| Multiply by 12 (the number of months in a year). 12b. The result is your annual income for this part of the form. | | | | | | | 12b. | X 12 \$22,800.00 |
| 3 Calculate the median family inc | come that applies to yo | u. Follow these steps | s: | | | | | |
| Fill in the state in which you live. | | Illinois | entition in the second | | | | | |
| Fill in the number of people in you | r household. | 3 | | | | | | |
| Fill in the median family income fo household. | r your state and size of | *************************************** | | | | *************************************** | 13. | \$80,233.00 |
| To find a list of applicable median instructions for this form. This list 4. How do the lines compare? | income amounts, go onl may also be available at t | ine using the link spe he bankruptcy clerk's | cified in the s office. | eparate | | | - | |
| 14a. Line 12b is less than or Go to Part 3. | equal to line 13. On the to | op of page 1, check b | oox 1, There i | is no presumpti | on of ab | use. | | |
| 14b. Line 12b is more than ling Go to Part 3 and fill out | ne 13. On the top of page Form 122A-2. | e 1, check box 2, The | e presumptior | n of abuse is de | etermined | l by Form 122A | -2. | |
| art 3: Sign Below | | 1 | | | | | | |
| By signing here, I declare under p | penalty of perjury that the | information on this s | statement and | I in any attachm | nents is tr | rue and correct. | ži | |
| | 10 - | | | 3 | | | | |
| Signature of Debtor 1 | Leur | 2 | Signature | of Debtor 2 | _ | | | |
| Date 10/23/2018 MM/DD/YYYY | | | Date 10/ | <mark>/23/2018</mark> M/DD/YYYY | | | | |
| If you checked line 14a, do NC If you checked line 14b, fill out | | | | z. | | | | |

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 66 of 75

THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Thank you for selecting The Semrad Law Firm LLC (the "Firm") as legal counsel. It is our policy to confirm in writing the terms of our engagement, including the scope of our representation and how we will charge for our legal services. Those terms are set forth below.

- Scope of Representation. The Firm will be representing you in all aspects of your Bankruptcy case filed under Chapter 7 of the United Stated Bankruptcy Code except for any adversary proceedings that may be filed against you. The scope of this representation does not include any other civil or criminal proceedings.
- 2. Conditional Representation. The Firm has agreed to represent you on the condition that you will enter into and sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case. If you refuse to enter into and sign the agreement within ten (10) days after the filing of your case, the Firm will file a motion to withdraw from representing you.
- 3. Prepetition Fees.
 - a. Before the case is filed, the Firm agrees to:
 - Personally counsel you regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures as well as nonbankruptcy options, and answer your questions;
 - ii. Personally explain to you that the Firm is being engaged to represent you on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees are determined and paid;
 - Personally review with you and sign the completed petition, statements, and schedules;
 - iv. Timely prepare and file your petition, statements, and schedules,
 - v. Advise you on which creditors you will need to continue to pay, such as housing or vehicle payments that you intend to retain.
 - b. The fee for services provide before the case is filed is \$500.00.
 - c. The Firm may also incur costs for such items as credit reports and tax transcripts for which it will <u>not</u> seek reimbursement.
- 4. Post-Petition Fees.
 - a. After the case is filed, the Firm agrees to:
 - Advise you of the requirement to attend the meeting of creditors and notify you of the date, time, and place of the meeting;

- ii. Advise you of the requirement to attend a debtor education course and provide a certificate of completion to the Firm;
- iii. Send notice of your case filing to creditors;
- iv. Correspond with creditors regarding any matters necessary for the administration of your case, including to cease payroll garnishments, unfreeze bank accounts, or recover property that was improperly seized by a creditor;
- v. Timely submit to the Chapter 7 trustee properly documented proof of income, tax records as well as any other necessary documentation;
- vi. Provide you with knowledgeable legal representation at the meeting of creditors as well as any continued or rescheduled meetings in time for check-in and examination;
- vii. Timely prepare and file the notice of completion of the debtor education course;
- viii. If the Firm will be employing another attorney to attend the meeting of creditors, personally explain to you, in advance, the role and identity of the other attorneys and provide that attorney with your file in sufficient time to review it and properly represent you at the meeting;
- ix. Timely negotiate with the Trustee regarding any property or actions that the Trustee may pursue that could be adverse to your interests;
- x. Timely prepare, file, and serve any necessary statements, amended statements, amended schedules and any change of address, in accordance with information provided by you;
- xi. Monitor all incoming case information, including but not limited to, Reaffirmation agreements, notice of audits by the US Trustee, correspondence from you or any interested parties;
- xii. Review and negotiate, if necessary, any reaffirmation agreements and personally explain the terms of said agreements to you;
- xiii. Be available to respond to your questions throughout the term of the case;
- xiv. Review and timely respond, if necessary, to Trustee motions to dismiss the case;
- xv. Review and timely respond, if necessary, to motions for relief from stay;
- xvi. Prepare, file, and serve all appropriate motions to avoid liens;
- xvii. Prepare, file, and serve all appropriate motion to redeem;
- xviii. Send In Re Mendiola letters to previously undisclosed creditors; and
- xix. Provide any other legal services necessary for the administration of the case.
- b. The fee for services provide after the case is filed is \$500.00.
- c. The firm will have no right to payment of the fee listed in section 4(b) unless you sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case.

- d. After the case is filed, the Bankruptcy Court will require payment of filing fees in the amount of \$335.00. In order to pay this, you have two (2) options (please circle one):
 - i. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
 - ii. Request that the Firm pay the costs on your behalf for which it will seek reimbursement from you;
- 5. Retainers and Payments to the Firm.
 - a. The fee being charged to you is a flat fee for services rendered during the Chapter 7 case and will be applied without the need for the Firm to keep detailed time records for the specific services performed.
 - b. Any funds paid to the Firm shall immediately become property of the Firm and will be deposited into the operating account of the Firm and will be used for general expenses of the firm.
 - c. While it is ordinarily your option to deposit funds with an attorney that shall remain your property as security for future services, the Firm does not represent clients under such a security retainer because bankruptcy cases require many disparate tasks and functions for the attorneys and support staff; some of which require legal expertise while others may only be ministerial in nature. The benefit to you is the firm's commitment to perform any and all work necessary to represent you in this Chapter 7 bankruptcy.
- 6. Right to Hire New Counsel. You always have the right at any time to terminate the Firm's representation and hire new counsel. Should you refuse to sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case, and the Firm moves to withdraw from representing you, you are strongly encouraged to hire new counsel.
- 7. Conflict Waiver. There is an inherent conflict wherever attorneys represent debtors in bankruptcy for a fee. The Firm is working to alleviate financial issues, while at the same time charging a fee. There have also previously been cases that questioned whether asking you to sign an agreement after the filing of your bankruptcy case to pay the Firm for services rendered after the filing of your case presents a possible additional conflict of interest. The Firm may only represent you if that representation will not be materially limited by the Firm's own interests. We believe our ability to represent you will not be affected by your ongoing obligation to pay our post-petition fee. By signing this agreement, you are waiving this conflict and are allowing us to represent you. You

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 69 of 75

do not have to waive this conflict of interest and can instead choose for the Firm not to represent you. You also have the right to consult separate counsel to discuss whether you should waive this conflict.

8. Merger. This agreement constitutes the entire agreement between you and the Firm. Any previous discussions or agreements are not valid or enforceable unless contained in this document.

| Very | tru | ly | Υοι | ırs, |
|------|-----|----|-----|------|
| | _ | | 1 | _ |

Attorney, The Semrad Law Firm

CONFIRMED:

Isabel Duenas

10.2317

Date

The Semrad Law Firm, LLC 20 S. Clark Street, 28th Floor Chicago IL 60603

CHAPTER 7 DISCLAIMERS

1. I understand that The Semrad Law Firm, LLC has pulled my credit report, but that credit report does not report every debt I owe. I understand that it is my responsibility to provide all my debts to The Semrad Law Firm, LLC to list in my bankruptcy.

2. I agree that in the preparation of my bankruptcy petition and schedules that I have disclosed to The Semrad Law Firm, LLC all my debts, sources of income, assets, personal property, real property, transfers of real estate or any property over the past 4 years, and all expenses I have.

3. I agree that I will attend my creditors meeting at the time, date, and location that will be mailed to me by the Bankruptcy Court. Failure to attend this meeting is grounds for my case to be dismissed. I understand that at this meeting I will bring my <u>driver's license or State ID and my original social security card</u>. I understand that failure to bring said requested documents to the meeting could be grounds for the meeting to not be held.

4. I understand and agree to complete my 2nd credit counseling course (Debtor Education course) within 45 days of my original 341 meeting date, and submit a copy of the certificate to my attorney and confirm receipt of the certificate. I also understand that there will be a separate cost for the 2nd course. I understand that failure to complete this 2nd course and submit it to my attorney can be grounds to have my case close without a discharge. I understand that if my case closes without a discharge, that additional filing fees would have to be paid to re-open my case to file the 2nd Debtor Education certificate.

5. If I have a garnishment coming out of my paycheck, The Semrad Law Firm, LLC will send notice of the bankruptcy to my payroll department and garnishing creditor to stop wage garnishments as long as I provide my payroll department contact information. If I choose to not provide my payroll contact information, I understand and agree that it is my responsibility to contact my payroll and garnishing creditor and provide them with proof of filing. Further, although the Semrad Law Firm, LLC will send notice of the bankruptcy filing to my payroll department and garnishing creditor, it is my responsibility to ensure notice was received.

Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 71 of 75

The Semrad Law Firm, LLC 20 S. Clark Street, 28th Floor Chicago IL 60603

| 6. | I understand that I must have filed my federal and state taxes for the past 4 years if I was legally required to, and failure to have done so is grounds to have my case dismissed. |
|-----|---|
| 7. | I understand that the entire firm of The Semrad Law Firm, LLC represents me and that while a different attorney might have counseled me and prepared my case, once it is filed, my case will be assigned to the attorneys and staff of the Chapter 7 department for the remainder of my case. |
| 8. | I understand and agree that I must fully disclose any and all assets, real property, cash, expected tax refunds, inheritance, or personal property of any kind prior to the filing of my bankruptcy. |
| 9. | I further understand that any assets including, but not limited to real property, cash, expected tax refunds, future settlements, potential or pending lawsuits, or personal property that has equity that cannot be exempted is subject to liquidation by the Chapter 7 Trustee. |
| 10. | I understand that the following debts will not be discharged in my Chapter 7 (this list shows the most common non-dischargeable debts, but not necessarily all): parking tickets, moving violations, student loans, certain governmental debts including taxes and code violations, and child support. |
| 11. | I understand that if I wish to keep a secured debt, for example, a mortgage(s) or automobile, I must sign a reaffirmation agreement. I understand that even if I am current on the debt, a reaffirmation agreement is offered solely at the discretion of the creditor. I understand that for my creditor(s) to offer me a reaffirmation agreement I must be current on my monthly payment. If I do not have a reaffirmation agreement offered to me by my finance company, that I may not be able to keep my secured debt. |
| | |

12. I understand that I will work with my attorney to ensure the reaffirmation agreements are timely received, signed and filed with the Court. I understand the reaffirmation agreement must be filed with the court before the case discharges. Once the reaffirmation agreement is signed, filed with the Court and approved, the debt will be non-dischargeable. I understand that the bankruptcy judge will review my budget when approving or denying the reaffirmation agreement and that it is possible that the judge may determine that the reaffirmation is not in my best interest and deny the reaffirmation.

The Semrad Law Firm, LLC 20 S. Clark Street, 28th Floor Chicago IL 60603



13. I understand that the scope of representation from The Semrad Law Firm, LLC does not extend to credit repair.

14. I understand that if I have made any recent credit card transactions, cash advances, or incurred loans during the 3 month period prior to my bankruptcy, an adversary lawsuit may be brough against me in bankruptcy court. An adversary is a lawsuit in which a creditor asks the court to make certain debt non-dischargeable. I understand that if I want The Semrad Law Firm, LLC to represent me in an adversary I must pay additional attorney's fees.



15. I have disclosed all prior bankruptcies that I have filed in the last eight (8) years. I further understand that if I have filed a Chapter 7 bankruptcy in the last eight (8) years, I am not eligible to file a Chapter 7 right now.

16. I understand that to be eligible for a Chapter 7 I cannot have any disposable income after paying all my monthly expenses, and I also have to pass the Form 122A Means test, and if I do have a significant amount of disposable income available or fail the Form 122A that I may be ineligible for a Chapter 7. I understand that if I do have any disposable income and we attempt to rebut the presumption, the United States Trustee may deem my case an abuse and I may have to convert to a Chapter 13 or let my case be dismissed.



17. I understand and acknowledge that when I surrender real property through my Chapter 7 bankruptcy that the property is still my responsibility until it is sold at a foreclosure sale. I must keep up the property insurance and maintenance of said property, including, but not limited to, future water bills until the sale date. I understand that, if I neglect to maintain the property and am assessed city code violations, I will be responsible to pay those fines. Further, I must continue to pay homeowners and association fees after the bankruptcy is filed until the property is sold. If I do not pay these fees the Association can sue me for the balance of unpaid fees from the filing of the bankruptcy until the property is sold.



Case 18-29824 Doc 1 Filed 10/23/18 Entered 10/23/18 19:15:57 Desc Main Document Page 73 of 75

The Semrad Law Firm, LLC 20 S. Clark Street, 28th Floor Chicago IL 60603

18. I understand that if I have a co-signer on any of my debts, the co-signer will still be responsible for that debt after the case is filed.

19. I agree that I authorized The Semrad Law Firm, LLC to file my bankruptcy case, after I reviewed my bankruptcy petition and schedules.

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY OR BANKRUPTCY PETITION PREPARER.

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST. Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules and Statement of Financial Affairs, as well as in some cases a Statement of Intention need to be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you will have to attend the required first meeting of the creditors where you may be questioned by a court official called a 'trustee' and by creditors.

If you choose to file a chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your chapter 13 plan and with the confirmation hearing on your plan which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than chapter 7 or chapter 13, you will want to find out what should be done from someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only attorneys, not bankruptcy petition preparers, can give you legal advice.

Debtor Date

I have been provided a copy of the above disclosure.

Disclosure Pursuant to 11 U.S.C. §527(a)(2)

You are notified:

- All information that you are required to provide with a petition and thereafter during a case under the Bankruptcy Code is required to be complete, accurate, and truthful.
- 2. All assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case. Some places in the Bankruptcy Code require that you list the replacement value of each asset. This must be the replacement value of the property at the date of filing the petition, without deducting for costs of sale or marketing, established after a reasonable inquiry. For property acquired for personal, family, or household use, replacement value means the price a retail merchant would charge for property of that kind, considering the age and condition of the property.
- 3. The following information, which appears on Official Form 22, Statement of Current Monthly Income, is required to be stated after reasonable inquiry: current monthly income, the amounts specified in section 707(b)(2), and, in a case under chapter 13 of the Bankruptcy Code, disposable income (determined in accordance with section 707(b)(2)).
- 4. Information that you provide during your case may be audited pursuant to provisions of the Bankruptcy Code. Failure to provide such information may result in dismissal of the case under this title or other sanction, including criminal sanctions.

Debtor Date

I have been provided a copy of the above disclosure.